

## **APPLICATION**

## **Tuesday Evenings**

Start Date: Tuesday, February 19, 2013 End Date: Tuesday, May 7, 2013 Hours: 6:30 pm – 9:30 pm Classroom Instruction – 11 Weeks

No Charge - Free

## Costa Mesa Police Department

Name:			Birth Date: _	
Address:	City:			_Zip:
Work Address:	City:			Zip:
Telephone (Home):		(Work):		
Drivers License Number:		State:	Expiration	Date:
Occupation:				
E-mail Address:				
Desired Name or "Nickname" (Spelling for Name Tags): _				
consent to a criminal records check and will provide a fin for the Costa Mesa Police Academy. If accepted as a st more than two absences and to be on time during the thirt	udent	, I agree to abi	de by all rules a	
Applicant's Signature		Date	e:	
How did you hear about our Citizens Academy?				

## Mail or deliver application to:

Police Department – CPS Kelly Vucinic City of Costa Mesa 99 Fair Drive, P.O. Box 1200 Costa Mesa CA 92628-1200 Attention: Citizens Academy Staff